



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**☐ Declaration  
Submitted  
with Initial  
Filing

OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
37 CFR 1.16 (e))  
required)

Attorney Docket Number 45098.00011.UTL1

First Named Inventor Todd Vernon *et al.***COMPLETE IF KNOWN**

Application Number 10/776,461

Filing Date February 10, 2004

Art Unit 2631

Examiner Name TBD

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHODS AND APPARATUS FOR PROVIDING EGALITARIAN CONTROL IN A  
MULTIMEDIA COLLABORATION SESSION**

(Title of the Invention)

the specification of which

☐ is attached hereto

or

☒ was filed on (MM/DD/YYYY) 02/10/2004 as United States Application Number or PCT International

Application Number 10/776,461 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

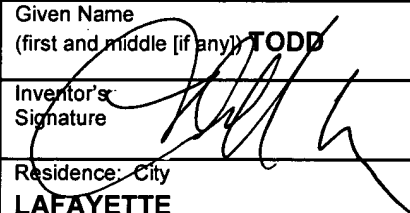
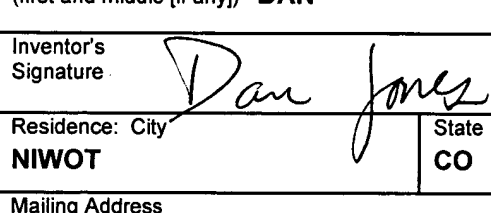
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

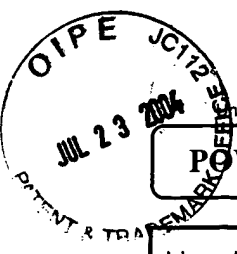
(Page 1 of 2)

This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.

# DECLARATION – Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number <b>36183</b> OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	Zip
Country	Telephone	Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>TODD</b>		Family Name or Surname <b>VERNON</b>	
Inventor's Signature 		Date <b>6/23/04</b>	
Residence: City <b>LAFAYETTE</b>	State <b>CO</b>	Country <b>USA</b>	Citizenship <b>USA</b>
Mailing Address <b>1173 BLUE STEM TRAIL</b>			
City <b>LAFAYETTE</b>	State <b>CO</b>	ZIP <b>80026</b>	Country <b>USA</b>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>DAN</b>		Family Name or Surname <b>JONES</b>	
Inventor's Signature 		Date <b>6/23/04</b>	
Residence: City <b>NIWOT</b>	State <b>CO</b>	Country <b>USA</b>	Citizenship <b>USA</b>
Mailing Address <b>7550 ESTATE CIRCLE</b>			
City <b>NIWOT</b>	State <b>CO</b>	ZIP <b>90503</b>	Country <b>USA</b>
<input type="checkbox"/> Additional inventors are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			



**POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO**

I hereby appoint:

☒ Practitioners associated with the Customer Number:

**36183**

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

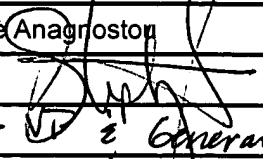
Assignee Name and Address:

RAINDANCE COMMUNICATIONS, INC.  
1157 CENTURY DRIVE  
LOUISVILLE, COLORADO 80027

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

**SIGNATURE of Assignee of Record**

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Name	Stephanie Anagnostou		
Signature		Date	6/23/04
Title	Senior VP & General Counsel	Telephone	(303) 928-2989